

## REISSUE PATENT APPLICATION TRANSMITTAL

Address to:

Assistant Commissioner for Patents  
Box Reissue  
Washington, DC 20231

Attorney Docket No.

1819/100053

First Named Inventor

Bruce Smith

Original Patent Number

6,368,755

Original Patent Issue Date  
(Month/Day/Year)

04/09/2002

Express Mail Label No.

EV138587115US

## APPLICATION FOR REISSUE OF:

(Check applicable box)



Utility Patent



Design Patent



Plant Patent

## APPLICATION ELEMENTS (37 CFR 1.173)

1. ☒ Fee Transmittal Form (PTO/SB/56)  
(Submit an original, and a duplicate for fee processing)
2. ☒ Applicant claims small entity status. See 37 CFR 1.27.
3. ☒ Specification and Claims in double column copy of patent format (amended, if appropriate)
4. ☒ Drawing(s) (proposed amendments, if appropriate)
5. ☒ Reissue Oath/Declaration (original or copy)  
(37 C.F.R. § 1.175) (PTO/SB/51 or 52)
6. ☐ Power of Attorney
7. Original U.S. Patent currently assigned? ☒ Yes ☐ No  
(If Yes, check applicable box(es))
  - ☒ Written Consent of all Assignees (PTO/SB/53)
  - ☒ 37 C.F.R. § 3.73(b) Statement (PTO/SB/96)
8. ☐ CD-ROM or CD-R in duplicate, Computer Program (Appendix) or large table
9. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all of the following are necessary)
  - a. ☐ Computer Readable Form (CRF)
  - b. Specification Sequence Listing on:
    - i. ☐ CD-ROM (2 copies) or CD-R (2 copies); or
    - ii. ☐ paper
  - c. ☐ Statements verifying identity of above copies

## ACCOMPANYING APPLICATION PARTS

10. ☒ Statement of status and support for all changes to the claims. See 37 CFR 1.173 (c).
11. ☐ Original U.S. Patent for surrender
  - ☐ Ribboned Original Patent Grant
  - ☐ Statement of Loss (PTO/SB/55)
12. ☐ Foreign Priority Claim (35 U.S.C. 119) (if applicable)
13. ☒ Information Disclosure Statement (IDS)/PTO-1449 ☒ Copies of IDS Citations
14. ☐ English Translation of Reissue Oath/Declaration (if applicable)
15. ☐ Preliminary Amendment
16. ☒ Return Receipt Postcard (MPEP 503) (Should be specifically itemized)
17. Other: Formal Drawings

## 18. CORRESPONDENCE ADDRESS



Customer Number or Bar Code Label

(Insert Customer No. or Attach bar code label here)



Correspondence address below

Name

Nixon Peabody LLP

Address

P.O. Box 31051

Zip Code

14603

City

Rochester

State

NY

Fax

585/263-1600

Country

U.S.A.

Telephone

585/263-1519

NAME (Print/Type)

John Campa

Registration No. (Attorney/Agent)

49,014

Signature

*John Campa*

Date

November 4, 2003

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

REISSUE APPLICATION FEE TRANSMITTAL FORM						Docket Number (Optional) 1819/100053		
Claims as Filed - Part 1								
Claims in Patent		Number Filed in Reissue Application	(3) Number Extra	Small Entity		Other than a Small Entity		
				Rate	Fee	Rate	Fee	
(A) 22	Total Claims (37 CFR 1.16(i))	(B) 22	**** 0 =	x \$ 9 =	0.00	or	x \$ =	
(C) 3	Independent claims (37 CFR 1.16(i))	(D) 3	* 0 =	x \$ 42 =	0.00		x \$ =	
Basic Fee (37 CFR 1.16(h))					\$ 385.00		\$	
Total Filing Fee					\$ 385.00	OR	\$	
Claims as Amended - Part 2								
	(1) Claims Remaining After Amendment		(2) Highest Number Previously Paid For	(3) Extra Claims Present	Small Entity		Other than a Small Entity	
					Rate	Fee	Rate	Fee
Total Claims (37 CFR 1.16(i))	***	MINUS	**	* =	x \$ =		x \$ =	
Independent Claims (37 CFR 1.16(i))	***	MINUS	*****	=	x \$ =		x \$ =	
Total Additional Fee					\$	OR	\$	
<p>* If the entry in (D) is less than the entry in (C), Write "0" in column 3.</p> <p>** If the "Highest Number of Total Claims Previously Paid For" is less than 20, Write "20" in this space.</p> <p>*** After any cancellation of claims.</p> <p>**** If "A" is greater than 20, use (B - A); if "A" is 20 or less, use (B - 20).</p> <p>***** "Highest Number of Independent Claims Previously Paid For" or Number of Independent Claims in Patent (C).</p> <p><input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.</p> <p><input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____. A duplicate copy of this sheet is enclosed.</p> <p><input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any additional fees under 37 CFR 1.16 or 1.17 which may be required, or credit any overpayment to Deposit Account No. <u>14-1138</u>. A duplicate copy of this sheet is enclosed.</p> <p><input checked="" type="checkbox"/> A check in the amount of \$ <u>385.00</u> to cover the filing / additional fee is enclosed.</p> <p><input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.</p> <p style="text-align: center;"><b>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</b></p> <div style="display: flex; justify-content: space-between; margin-top: 20px;"> <div style="width: 45%;"> <p><u>November 4, 2003</u> Date</p> </div> <div style="width: 45%; text-align: center;"> <p><u>John Campa</u> Signature of Applicant, Attorney or Agent of Record</p> <p><b>John Campa, Registration No. 49,014</b> Typed or printed name</p> </div> </div>								

## EXPRESS MAIL CERTIFICATE

DOCKET NO.: 1819/100053  
APPLICANTS: Bruce W. Smith  
TITLE: MASKS FOR USE IN OPTICAL LITHOGRAPHY BELOW  
180 NM

Certificate is attached to the **Reissue Application Transmittal Form (1 page)** of the above-identified reissue application.

"EXPRESS MAIL" NUMBER : EV138587115US  
DATE OF DEPOSIT : November 4, 2003

I hereby certify that this paper or fee is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR 1.10 on the date indicated above and is addressed to Mail Stop: Reissue, Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

**Shawn A. Lockett**

(Typed or Printed Name of Person Mailing  
Paper of Fee)

  
(Signature of Person Mailing Paper of Fee)

**EXPRESS MAIL CERTIFICATE**

DOCKET NO.: **1819/100053**

APPLICANTS: **Bruce W. Smith**

TITLE: **MASKS FOR USE IN OPTICAL LITHOGRAPHY BELOW  
180 NM**

Certificate is attached to the **Reissue Patent Application including copy of marked-up issued patent specification, claims, and abstract (4 pages) and drawings (2 pages)** of the above-identified reissue application.

“EXPRESS MAIL” NUMBER : **EV138587115US**  
DATE OF DEPOSIT : **November 4, 2003**

I hereby certify that this paper or fee is being deposited with the United States Postal Service “Express Mail Post Office to Addressee” service under 37 CFR 1.10 on the date indicated above and is addressed to Mail Stop: Reissue, Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

**Shawn A. Lockett**

(Typed or Printed Name of Person Mailing  
Paper of Fee)

  
(Signature of Person Mailing Paper of Fee)

**EXPRESS MAIL CERTIFICATE**

DOCKET NO.: **1819/100053**

APPLICANTS: **Bruce W. Smith**

TITLE: **MASKS FOR USE IN OPTICAL LITHOGRAPHY BELOW  
180 NM**

Certificate is attached to the **Reissue Application Fee Transmittal Form  
(1 page)** of the above-identified reissue application.

"EXPRESS MAIL" NUMBER : **EV138587115US**  
DATE OF DEPOSIT : **November 4, 2003**

I hereby certify that this paper or fee is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR 1.10 on the date indicated above and is addressed to Mail Stop: Reissue, Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

**Shawn A. Lockett**

(Typed or Printed Name of Person Mailing  
Paper of Fee)

  
(Signature of Person Mailing Paper of Fee)

**EXPRESS MAIL CERTIFICATE**

DOCKET NO.: **1819/100053**

APPLICANTS: **Bruce W. Smith**

TITLE: **MASKS FOR USE IN OPTICAL LITHOGRAPHY BELOW  
180 NM**

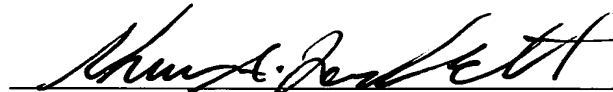
Certificate is attached to the **Statement of Status and Support for Changes to the Claims Under 37 C.F.R. § 1.173(c) (2 pages)** of the above-identified reissue application.

"EXPRESS MAIL" NUMBER : **EV138587115US**  
DATE OF DEPOSIT : **November 4, 2003**

I hereby certify that this paper or fee is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR 1.10 on the date indicated above and is addressed to Mail Stop: Reissue, Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

**Shawn A. Lockett**

(Typed or Printed Name of Person Mailing  
Paper of Fee)



(Signature of Person Mailing Paper of Fee)

**EXPRESS MAIL CERTIFICATE**

**DOCKET NO.:** 1819/100053

**APPLICANTS:** Bruce W. Smith

**TITLE:** MASKS FOR USE IN OPTICAL LITHOGRAPHY BELOW  
180 NM

Certificate is attached to the **Submission of Formal Drawings (5 sheets)** of the above-identified reissue application.

**"EXPRESS MAIL" NUMBER :** EV138587115US  
**DATE OF DEPOSIT :** November 4, 2003

I hereby certify that this paper or fee is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR 1.10 on the date indicated above and is addressed to Mail Stop: Reissue, Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

**Shawn A. Lockett**

(Typed or Printed Name of Person Mailing  
Paper of Fee)



(Signature of Person Mailing Paper of Fee)

## EXPRESS MAIL CERTIFICATE

DOCKET NO.: 1819/100053  
APPLICANTS: Bruce W. Smith  
TITLE: MASKS FOR USE IN OPTICAL LITHOGRAPHY BELOW  
180 NM

Certificate is attached to the **Reissue Application Declaration by the Assignee (3 pages)** of the above-identified reissue application.

"EXPRESS MAIL" NUMBER : EV138587115US  
DATE OF DEPOSIT : November 4, 2003

I hereby certify that this paper or fee is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR 1.10 on the date indicated above and is addressed to Mail Stop: Reissue, Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

**Shawn A. Lockett**

(Typed or Printed Name of Person Mailing  
Paper of Fee)

  
(Signature of Person Mailing Paper of Fee)



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Reissue Application No.:	To Be Assigned	)
		)
Filed	: Herewith	)
		)
U.S. Patent No.	: 6,368,755	)
		)
Granted	: April 9, 2002	)
		)
Patentee	: Bruce W. Smith	)
		)
For	: MASKS FOR USE IN	)
	OPTICAL LITHOGRAPHY	)
	BELOW 180 NM	)

---

SUBMISSION OF FORMAL DRAWINGS

**Mail Stop: REISSUE**  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

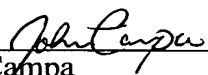
Dear Sir:

Enclosed for filing in the above-identified reissue application are FIVE sheets of formal drawings for the Office's consideration. Patentee submits that formal drawings were never submitted during prosecution of the application upon which the above-identified reissue application is based. Accordingly, the enclosed drawings are simply formal versions of the drawings contained in the above-identified U.S. Patent with no further changes. As such, no new matter has been added.

Patentee respectfully requests the Office to include the enclosed formal drawings in any reissue patent that may be granted.

Respectfully submitted,

Date: November 4, 2003

  
\_\_\_\_\_  
John Campa  
Registration No. 49,014

NIXON PEABODY LLP  
Clinton Square, P.O. Box 31051  
Rochester, New York 14603-1051  
Telephone: (585) 263-1519  
Facsimile: (585) 263-1600

**EXPRESS MAIL CERTIFICATE**

DOCKET NO.: **1819/100053**

APPLICANTS: **Bruce W. Smith**

TITLE: **MASKS FOR USE IN OPTICAL LITHOGRAPHY BELOW  
180 NM**

Certificate is attached to the **Statement Under 37 CFR 3.73(b) (1 page)** of the above-identified reissue application.

"EXPRESS MAIL" NUMBER : **EV138587115US**  
DATE OF DEPOSIT : **November 4, 2003**

I hereby certify that this paper or fee is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR 1.10 on the date indicated above and is addressed to Mail Stop: Reissue, Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

**Shawn A. Lockett**

(Typed or Printed Name of Person Mailing  
Paper of Fee)

  
(Signature of Person Mailing Paper of Fee)